State of North Carolina Department of Environment, Health and Natural Resources Winston-Salem Regional Office

James B. Hunt, Jr., Governor Jonathan B. Howes, Secretary



March 26, 1996

<u>CERTIFIED MAIL NUMBER: P-536 317 038</u> RETURN RECEIPT REQUESTED

Piedmont Sheet Metal 801 North Broad Street Winston-Salem, NC 27101

Attn: Ted Cook

SUBJECT: Underground Storage Tank (UST) Closure Assessment at Piedmont Sheet

Metal, 801 North Broad Street, Winston-Salem, Forsyth County, Incident

Number Unassigned

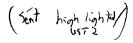
Dear Mr. Cook:

The Groundwater Section of the Winston-Salem Regional Office is now reviewing the UST closure assessment for the subject location. In order to determine whether or not the closure was performed in accordance with State and Federal regulations, the Groundwater Section must be provided with the following information 30 days from receipt of this letter:

a completed GW/UST-2 "Site Investigation Report For Permanent Closure or Change-in-Service of U.S.T." Enclosed you will find a blank copy or the original on which incomplete areas have been highlighted; and,

a sample protocol: collection method (i.e. shovel, auger, backhoe, etc.), how samples were preserved and transported and sample depths.





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Your cooperation is appreciated. Providing the requested information by the deadline specified in this letter will prevent a Notice of Violation being issued to you for the failure to provide an adequate closure report.

Please refer to the file name, **Piedmont Sheet Metal**, on the cover letter of your reply. This will help us speed up the review. If you have any questions please contact me at the letterhead address and/or telephone number.

Sincerely,

Chomas Moore

Thomas Moore Hydrogeological Technician

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cc: Regional Office Files

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SENDER: = Complete items 1 and/or 2 for additional services. = Complete items 3, 4a, and 4b. = Print your name and address on the reverse of this form so card to you.	I also wish to receive the following services (for an extra fee):
Print your name and address on the reverse of this form so card to you. Attach this form to the front of the mailpiece, or on the back permit. Write "Return Receipt Requested" on the mailpiece below to t	he article number. ered and the date 2. □ Restricted Delivery Consult postmaster for fee. 4a. Article Number
93. Article Addressed to: PIEDMONT SHEET METAL 801 NORTH BROAD STREET WINSTON SALEM, NC 27101	4b. Service Type Registered Express Mail Return Receipt for Merchandise COD 7. Date of Delivery 3 - 3 - 9 - 9 - 9 - 9 - 9 - 9 - 9 - 9 -
5. Received By: (Print Name) 6. Signature: (Addressee or Agent)	8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811 , December 1994	Domestic Return Receipt